PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

5 SMV41.1

OI AIMO AO EU ED DADEL												
		CLAIMS A	S FILED - PART I					SMALL ENTITY			OTHER	THAN
TOTAL CLAIMS			(Column	11)	(Column 2)] _	TYPE [OR	SMALL	ENTITY
TOTAL CLAIMS			17		·			RATE	FEE]	RATE	FEE
FOR			NUMBER	FILED	NUMBER EXTRA		. [BASIC FEE	355.00	OR	BASIC FEE	710.00
TC	TAL CHARGE	ABLE CLAIMS	17 mir	nus 20=	•			X\$ 9=		OR	X\$18=	
	EPENDENT C			inus 3 =				X40=		OR	X80=	
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL	355	OR	TOTAL	
12 22 22 CLAIMS AS AMENDED - PART II									724		OTHER	THAN
(Column 1)			(Colum			(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A	•	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 9	Minus	-2	0	=		X\$ 9=		OR	X\$18=	
AME	Independent	NTATION OF MI	Minus		CLAINA	=		X40=		OR	X80=	
	TINOT PALOL	MINION OF MI	DETIFIE DE	, EIADEIA I	CLAIM			+135=		OR	+270=	
O	$O \sim I$						L A:	TOTAL DDIT, FEE)	OR	TOTAL ADDIT. FEE	
Λ	9.04	(Column 1)	(Colum		nn 2)	(Column 3)		0011.102			ADDIT: 1 CE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	y	HIGH NUME PREVIO	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	• •	Minus	<u> </u>		=		X\$ 9=		OR	X\$18=	
AME	Independent	\cdot	Minus V	***		=		X40=		OR	X80=	<u> </u>
	FIRST PRESE	NTATION OF ML	LTIPLE DEF	PENDENT	CLAIM			.125			.070	
								+135= TOTAL		OR	+270= TOTAL	
		ΑŒ	DOIT, FEE		OR ,	ADDIT. FEE						
(Column 1) (Column 2) (Column 3)												
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
4ME	Independent	•	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	ENDENT	CLAIM		┞			<u>ب</u>		
• 6	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270 =	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR ,	TOTAL ODIT, FEE	
		ber Previously Paid					r lound	d in the app	ropriate box	in colu	ımn 1,	